

ORBUS Community Futures Club Member Application

NAME		Please Check <input type="checkbox"/> Regular Membership <input type="checkbox"/> Youth 15-18 years <input type="checkbox"/> Elder 60 plus
MAILING ADDRESS		
Contact Tel	Cel No.	Email:

What other non-profit groups or other Organizations are you a member of ?	website

What areas would you like to help Orbus with in building better futures?	Check
Local Orbus events	
Communities Futures Conference	
Volunteering with non-profit organizations	
Join a Local Orbus Business Networks Chapter	
Other – please specify	

TELL US ABOUT YOU

How do you fit Orbus support for youth and elders, in the areas of the arts, sports, music, education, culture and life long learning?

Please provide a short one paragraph summary of about you and how you can assist Orbus in its goals:

The undersigned declare(s) that the statements are made or given for the purpose of an application for membership and are to the best of my/our knowledge true and correct. The undersigned consents to and hereby authorizes Orbus Community Futures Foundation or Orbus International Business Networks Inc., and its affiliates and its agents to make any inquiries it deems necessary to reach a decision on this application.

The undersigned acknowledges and agrees that if accepted as a Orbus Community Futures Club member the undersigned will participate in the programs of Orbus and post information about Orbus programs in its own publications, communications and correspondence to family, community or otherwise. The undersigned acknowledges that goals of Orbus to help build better communities for the future depends on all of the participants and helping spread the word will help bring in more people working together to better our world. We ask that Orbus logo and acknowledgement of support be published in your web-based information, social media used, communications to others etc.

The undersigned further acknowledges and agrees its participation is in the sole discretion of Orbus Community Futures Foundation or Orbus International Business Networks Inc (both collectively referred to as "Orbus).

Enclosed is my check for membership made payable to Orbus Community Futures Foundation, PO Box 43052, Victoria, BC Canada, V8X 1R0, for the following amount:

- Regular Member \$ 25.00 _____
- Youth 15-18 years \$5.00 _____ (waived for volunteers for Orbus events)
- Elder 60 plus \$15.00 _____

Dated _____ 20 __

Signature:

Sign above (print name: _____)